

# ROBINSON TOWNSHIP

## NEW ADDRESS APPLICATION

PLEASE ASSIGN AN ADDRESS TO MY:

☐ New Building  
☐ Trailer

1. YOUR NAME \_\_\_\_\_

2. CURRENT MAILING ADDRESS \_\_\_\_\_

3. IS THIS A	<input type="checkbox"/> RESIDENCE	YOUR NAME _____
	<input type="checkbox"/> BUSINESS	BUSINESS NAME _____
	<input type="checkbox"/> OTHER	NAME _____

4. NAME OF ROAD OR STREET ON WHICH BUILDING IS LOCATED \_\_\_\_\_

5. NAME OF PROPERTY OWNER \_\_\_\_\_

6. NEIGHBOR ON RIGHT (FACING BUILDING) \_\_\_\_\_

APPROXIMATE DISTANCE IN FEET \_\_\_\_\_

7. NEIGHBOR ON LEFT (FACING BUILDING) \_\_\_\_\_

APPROXIMATE DISTANCE IN FEET \_\_\_\_\_

8. NEIGHBOR ACROSS THE STREET \_\_\_\_\_

9. DAYTIME PHONE NUMBER \_\_\_\_\_

10. HOME PHONE NUMBER \_\_\_\_\_

11. NEW ASSIGNED ADDRESS \_\_\_\_\_

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TOWNSHIP USE

☐ Post Office Copy

☐ Update 911 Address List